

1/003 Fax Se
RECEIVED
CENTRAL FAX CENTER

APR 21 2006



Patent Technology Centers

Facsimile Transmission

To:

Name:	central Fax
Company:	
Fax Number:	571-273-8300
Voice Phone:	

From:

Name:	
Official Fax Number:	(571) 273-8300
Official After Final Fax Number:	(571) 273-8300
Voice Phone:	

37 C.F.R. 1.6 sets forth the types of correspondence that can be communicated to the Patent and Trademark Office via facsimile transmissions. Applicants are advised to use the certificate of facsimile transmission procedures when submitting a reply to a non-final or final Office action by facsimile (37 CFR 1.8(a)).

Fax Notes:

Date and time of transmission: Friday, April 21, 2006 9:28:48 AM
Number of pages including this cover sheet: 03

RECEIVED
CENTRAL FAX CENTER

APR 21 2006



**North America
Intellectual Property corporation**

P.O. BOX 506, Merrifield, VA 22116, U.S.A.

Voice Mail: 302-729-1562 FAX:806-498-6673 e-mail:winstonhsu@naipo.com

FAX TO : ALAM SHAHID AL

ART UNIT: 2162

TEL : (571) 272-4030

FAX: (571) 273-4030

FROM : Winston Hsu, PATENT AGENT, REG. NO. : 41,526

SERIAL NO. : 10/064,595

ATTORNEY DOCKET NO.: IACP0005USA

SUBJECT: Authorization to Act in a Representative Capacity Form

TOTAL PAGES : 2 PAGES (INCLUDING COVER PAGE)

Winston Hsu APR 21 2006

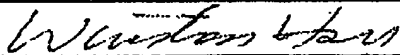
WARNING !! DUPLICATE COPY !!

Dear Sir,

The Authorization to Act in a Representative Capacity Form has been sent to Central Fax No. 571-273-8300 on 04/21/2006. This duplicate copy is submitted for your convenience.

Sample Form (09-04)

AUTHORIZATION TO ACT IN A REPRESENTATIVE CAPACITY

In re Application of: Ju-Nan Chang, Wen-Biao Lee					
Application No. 10/064,595					
Filed: 07/29/2002					
Title: METHOD FOR MULTIPLE CONFIGURATIONS OF WIRELESS NETWORK CONNECTION SETTINGS					
Attorney Docket No. IACP0005USA	Art Unit: 2171				
<p>The practitioner named below is authorized to conduct interviews and has the authority to bind the principal concerned. Furthermore, the practitioner is authorized to file correspondence in the above-identified application pursuant to 37 CFR 1.34:</p> <table border="1"><thead><tr><th>Name</th><th>Registration Number</th></tr></thead><tbody><tr><td>Scott Margo</td><td>56,277</td></tr></tbody></table>		Name	Registration Number	Scott Margo	56,277
Name	Registration Number				
Scott Margo	56,277				
<p>This is not a Power of Attorney to the above-named practitioner. Accordingly, the practitioner named above does not have authority to sign a request to change the correspondence address, a request for an express abandonment, a disclaimer, a power of attorney, or other document requiring the signature of the applicant, assignee of the entire interest or an attorney of record. If appropriate, a separate Power of Attorney to the above-named practitioner should be executed and filed in the United States Patent and Trademark Office.</p>					
SIGNATURE of Practitioner of Record					
Signature 	Date APR 21 2006				
Name Winston Hsu	Registration No., if applicable 41,526				
Telephone 302-729-1562					

This form offers a sample or suggested format for an authorization for an agent. See MPEP § 713.05 for more information. This sample form is not an OMB officially approved form.

If you need assistance in completing the form, call 1-800-PTO-9199 and select option 2.